

O I P E JC168  
OCT 04 2004  
PATENT & TRADEMARK OFFICE

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/712,230
		Filing Date	11/13/2003
		First Named Inventor	Kelly Kleinman
		Art Unit	3712
		Examiner Name	Miller, Bena B
Total Number of Pages in This Submission		Attorney Docket Number	Celebrity.01

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		Remarks
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

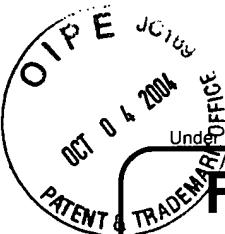
Firm Name	Law Offices of Clement Cheng		
Signature			
Printed name	Clement Cheng		
Date	10-1-04	Reg. No.	45463

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Signature			
Typed or printed name	Peter Lawrence	Date	10-1-04

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# FEE TRANSMITTAL

## for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)665.00

## Complete if Known

Application Number	10/712,230
Filing Date	11/13/2003
First Named Inventor	Kelly Kleinman
Examiner Name	Miller, Bena B
Art Unit	3712
Attorney Docket No.	Celebrity.01

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

 Deposit Account:

Deposit Account Number	<input type="text"/>
Deposit Account Name	<input type="text"/>

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee	Fee Code (\$)	Fee Description	Fee Paid
1001	790	2001	395	Utility filing fee
1002	350	2002	175	Design filing fee
1003	550	2003	275	Plant filing fee
1004	790	2004	395	Reissue filing fee
1005	160	2005	80	Provisional filing fee
SUBTOTAL (1) (\$)				0

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>
Multiple Dependent	- 3** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>

## Large Entity Small Entity

Fee Code (\$)	Fee	Fee Code (\$)	Fee Description
1202	18	2202	9 Claims in excess of 20
1201	88	2201	44 Independent claims in excess of 3
1203	300	2203	150 Multiple dependent claim, if not paid
1204	88	2204	44 ** Reissue independent claims over original patent
1205	18	2205	9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)			

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee	Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051	65 Surcharge - late filing fee or oath	<input type="text"/>
1052	50	2052	25 Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
1053	130	1053	130 Non-English specification	<input type="text"/>
1812	2,520	1812	2,520 For filing a request for ex parte reexamination	<input type="text"/>
1804	920*	1804	920* Requesting publication of SIR prior to Examiner action	<input type="text"/>
1805	1,840*	1805	1,840* Requesting publication of SIR after Examiner action	<input type="text"/>
1251	110	2251	55 Extension for reply within first month	<input type="text"/>
1252	430	2252	215 Extension for reply within second month	<input type="text"/>
1253	980	2253	490 Extension for reply within third month	<input type="text"/>
1254	1,530	2254	765 Extension for reply within fourth month	<input type="text"/>
1255	2,080	2255	1,040 Extension for reply within fifth month	<input type="text"/>
1401	340	2401	170 Notice of Appeal	<input type="text"/>
1402	340	2402	170 Filing a brief in support of an appeal	<input type="text"/>
1403	300	2403	150 Request for oral hearing	<input type="text"/>
1451	1,510	1451	1,510 Petition to institute a public use proceeding	<input type="text"/>
1452	110	2452	55 Petition to revive - unavoidable	<input type="text"/>
1453	1,330	2453	665 Petition to revive - unintentional	<input type="text"/>
1501	1,370	2501	685 Utility issue fee (or reissue)	<input type="text"/>
1502	490	2502	245 Design issue fee	<input type="text"/>
1503	660	2503	330 Plant issue fee	<input type="text"/>
1460	130	1460	130 Petitions to the Commissioner	<input type="text"/>
1807	50	1807	50 Processing fee under 37 CFR 1.17(q)	<input type="text"/>
1806	180	1806	180 Submission of Information Disclosure Stmt	<input type="text"/>
8021	40	8021	40 Recording each patent assignment per property (times number of properties)	<input type="text"/>
1809	790	2809	395 Filing a submission after final rejection (37 CFR 1.129(a))	<input type="text"/>
1810	790	2810	395 For each additional invention to be examined (37 CFR 1.129(b))	<input type="text"/>
1801	790	2801	395 Request for Continued Examination (RCE)	<input type="text"/>
1802	900	1802	900 Request for expedited examination of a design application	<input type="text"/>

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)665

## SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Clement Cheng	Registration No. (Attorney/Agent)	45463	Telephone	<u>(714) 825-0555</u>
Signature				Date	10-1-04

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